

# **Table of Contents**

**State/Territory Name: Maine**

**State Plan Amendment (SPA) #:15-007**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
JFK Federal Building, Government Center  
Room 2275  
Boston, Massachusetts 02203



**Division of Medicaid and Children's Health Operations / Boston Regional Office**

September 23, 2015

Mary Mayhew, Commissioner  
Department of Health and Human Services  
11 State House Station  
Augusta, Maine 04333-0011

RE: Maine ME 15-007

Dear Commissioner Mayhew:

We are now ready to approve State Plan Amendment (SPA) No. ME 15-007; attached you will find an approved copy of the SPA. As requested, this SPA is effective November 1, 2015.

The purpose of this SPA is to amend the State's approved Title XIX State Plan to provide telehealth as an alternative means of delivering services by a provider at a site other than the site where the beneficiary is located for the purposes of evaluation, diagnosis, consultation and treatment. The SPA includes reimbursement for the originating site facilities, telemonitoring of a patient in their home and for interprofessional telephone and internet assessment and management services provided by a consultative physician. This SPA has an estimated Federal budget impact of \$71,558 in Federal Fiscal Year 2016 and \$323,033 in Federal Fiscal Year 2017.


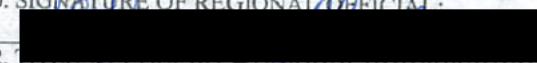
If you have any questions regarding this SPA, please contact Aimee Campbell-O'Connor, Maine State Lead, at 617/565-1642, or at [Aimee.Campbell-O'Connor@cms.hhs.gov](mailto:Aimee.Campbell-O'Connor@cms.hhs.gov).

Sincerely,

/s/

Richard R. McGreal  
Associate Regional Administrator

cc: Stefanie Nadeau, Director, Office of Maine Care Services  
Sam Senft, Director, Policy, Children's and Waiver Services

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>		1. TRANSMITTAL NUMBER: 15-007	2. STATE Maine
<b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR Centers for Medicare and Medicaid Services Department of Health and Human Services		4. PROPOSED EFFECTIVE DATE November 1, 2015	
5. TYPE OF PLAN MATERIAL (Check One):			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 42 CF §410.78, 22 M.R.S.A. §§ 42, 3173		7. FEDERAL BUDGET IMPACT:	
		a. FFY <u>2016</u> saving of \$ <u>722,632.10</u>	
		b. FFY <u>2017</u> saving of \$ <u>1,895,150.83</u>	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  Supplement 1 to Attachment 4.19-B page 9		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):  New	
10. SUBJECT OF AMENDMENT: Addition of reimbursement methodology for Telehealth Services			
11. GOVERNOR'S REVIEW (Check One):			
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED:	
<input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED		Commissioner, Dept. of Health and Human Services	
<input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO:	
13. TYPED NAME: Mary C. Mayhew		Stefanie Nadeau Director, MaineCare Services	
14. TITLE: Commissioner, Department of Health and Human Services		#11 State House Station 242 State Street Augusta, Maine 04333-0011	
15. DATE SUBMITTED: 06-25-2015			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED: 6/29/15		18. DATE APPROVED: 9/23/15	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 11/1/15		20. SIGNATURE OF REGIONAL OFFICIAL: 	
21. TYPED NAME: Richard McGreal		22. Associate Regional Administrator	
23. REMARKS:  On 7/29/15 the state provided pen and ink authorization to change box 7 to reflect that cost of implementing this change to the state plan would result in a cost increase. The amended box should read-			
7. FEDERAL BUDGET IMPACT:			
a. FFY <u>2016</u> cost of \$ <u>71,558</u>			
b. FFY <u>2017</u> cost of \$ <u>323,033</u>			

State Plan Title XIX of the Social Security Act  
Methods and Standards for Establishing Payments rates

**30. Telemedicine and Telemonitoring**

For telehealth visits in which a patient is with a provider at the originating site and a provider at the distant site is delivering the actual service, the GT modifier will be used and the payment to the distant site provider will be the same as if the service is provided face to face. The originating site provider is not paid at all for the underlying service but will receive an originating site fee (Q3014) for providing the support necessary to allow for the telehealth visit to take place (ie room, equipment, staff).

Qualifying distant site providers are reimbursed in accordance with the standard Medicaid reimbursement methodology.

With the application of the GT modifier, the distant site provider uses telemedicine to provide a service to the patient at the originating site.

Effective November 1, 2015, reimbursement for telehealth and telemonitoring will be as follows:

- Q3014 – Telehealth Originating Site Facility Fee → \$15.86/visit
- 99446 (99212) – Interprofessional Telephone/ internet assessment and management services provided by a consultative physician including a verbal and written report; 5-10 minutes of medical consultative discussion and review → \$24.14
- 99447 (99213) – Interprofessional Telephone/ internet assessment and management services provided by a consultative physician including a verbal and written report; 11-20 minutes of medical consultative discussion and review → \$40.51
- 99448 (99214) –Interprofessional Telephone/ internet assessment and management services provided by a consultative physician including a verbal and written report; 21-30 minutes of medical consultative discussion and review → \$61.05
- 99449 (99215) –Interprofessional Telephone/ internet assessment and management services provided by a consultative physician including a verbal and written report; 31 or more minutes of medical consultative discussion and review → \$82.60

Telemonitoring is a service in which a home health agency sets up equipment that allows for a members vital stats to be monitored daily. This can include things like blood pressure, pulse, weight etc. The data is monitored remotely by a nurse. This is the sole payment for this service. The fee is for professional services, as opposed to equipment. Any necessary in person visits would be billed separately.

- S9110 – Telemonitoring of Patient in their Home → \$84.55/month